

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

Docket No. 8-1032-169

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **CROSSLINKED COLLAGENIC PEPTIDE FOR PREVENTING POST-SURGICAL ADHESIONS**, the specification of which

(check) ☒ is attached hereto.

☐ was filed on _____ as Application Serial No. 09/not yet assigned
and was amended on _____ (if applicable).

☐ was filed as PCT international application Number _____ on _____
and was amended under PCT Article 19 on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information known to me to be material to patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application (s) designating at least one country other than the United States of America listed below and have also identified below any foreign application for patent or inventor's certificate or of any PCT international application (s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application on which priority is now claimed:

Prior Foreign Application(s)/PCT Applications (if PCT, indicate PCT)

Priority Claimed

<u>FR 99 02728</u>	<u>France</u>	<u>02 March 1999</u>	<u>X</u>	
(Number)	(Country)	(Day/Month/Year Filed)	Yes	No
_____	_____	_____	Yes	No
(Number)	(Country)	(Day/Month/Year Filed)	Yes	No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Prior U.S./PCT Applications (if PCT, indicate PCT)

(Application Serial No.)	Country	(Filing Date)	(Status--patented, pending, abandoned)
I hereby appoint the following attorney(s) and/or agents(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: H. Robert Henderson, Reg. No. 18,486; Michael O. Sturm, Reg. No. 26,078; John E. Cepican, Reg. No. 26,851; Richard L. Fix, Reg. No. 28,297; William H. Wright, Reg. No. 26,424; and Thomas J. Oppold, Reg. No. 42,054.			
Address all telephone calls to <u>Thomas J. Oppold</u>		telephone no. <u>515-288-9589</u>	
Address all correspondence to: <u>HENDERSON & STURM LLP</u>		telefax no. <u>515-288-4860</u>	
<u>206 Sixth Avenue</u>			
<u>Suite 1213</u>			
<u>Des Moines, Iowa 50309-4076</u>			

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor Alain CONSTANCIS

Inventor's signature _____

Date _____

Residence 69008 LYON FRANCECitizenship FrancePost Office Address 17 rue Saint Nestor69008 LYON FRANCE

Full name of second inventor Rémi MEYRUEIX

Inventor's signature _____

Date _____

Residence 69009 LYON FRANCE

Citizenship France

Post Office Address 42, avenue Hector Berlioz

69009 LYON FRANCE